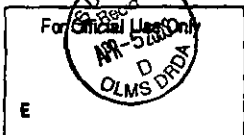


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30 2006

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>10322</u> <u>049878</u>	2 Fiscal Year Covered From <u>1/1/05</u> Through <u>12/31/05</u>
3 Name and address of person filing Name <u>BRYAN CLARKY</u> P.O. Box Bldg Room No. If any Street <u>4137 Griffin RD</u> City <u>Syracuse, NY</u> State <u>NY</u> ZIP Code + 4 <u>13215</u>	4 Name, file number and address of labor organization Name <u>INTERNATIONAL UNION OF ELEVATOR CONSTRUCTORS</u> Labor Organization File Number <u>049878</u> P.O. Box Building and Room Number If any Street <u>615 W Genesee St</u> City <u>Syracuse, NY</u> State <u>NY</u> ZIP Code + 4 <u>13204</u>
5 Position in labor organization <u>E-BOARD MEMBER</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6 Name and address of Employer (including trade name if any) Name Trade Name if any P.O. Box Bldg Room No. If any Street City State ZIP Code + 4	7 a. Nature of Interest, Transaction or Income 7 b. Amount

Signature

16 Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Bryan Clarky</u>	On <u>3-16-06</u> <u>315-422-5219</u> Date Telephone Number

Name of Person Filing	Bryan Clarry	File Number U	049-878
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name NEIEP

Trade Name if any

P O Box Bldg Room No if any

Street ELEVEN LARSON Way

City ATTLEBORO Falls

State MA

ZIP Code + 4

02763-1068

9 Business deals with

a Labor Organization

b Trust

c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No. if any

Street

City

State

ZIP Code + 4

11 a Nature of such dealing

SEE LM 30
Attachment

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

NEIEP School Instructor

12 b Amount

\$9890

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer

or Consultant

?

14 b Amount of payment

LM-30 Attachment

Name

Ending date of report period. 12/31/05

LM-30 File Number To be assigned

LM-30 Item
Number

1 la Per direction provided by U S DOL OLMS, Part B includes reporting of transactions including reimbursement of valid expenses by a trust in which the labor organization is interested as though the trust was a business This guidance provides a trust's dealings with a labor organization include the trusts receiving contributions from employers obligated to fund the trust per collective bargaining agreements negotiated by the labor organization While the guidance is unclear, other transactions may be deemed to constitute dealings with the union, trusts, or employers reportable in 11 b Accordingly no amount is reported in 11 b